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ABSTRACT

A description is presented of a nursing course entitled "The Family: Nursing Perspectives in Birth and Parenting." Introductory sections provide a brief course description, and information on curricular placement, class assignments, and the targeted student population. Next, the course content section emphasizes the interrelationship between health and the family examined in the course; presents long-range course goals and objectives, and end-of-course objectives; and lists course units and classes. Then, instruction materials, including texts, manuals, and audio-visual materials, and a bibliography of library materials, are listed. Next, the units of instruction are presented. Unit I, The Family in Society, includes classes in socio-cultural and health perspectives; family structure and identities; psychological perspectives; and normative and pathological adaptations. Unit II, The Family: Member Autonomy, focuses on growth to personal health, the effect of pregnancy on the family, parent-newborn interaction, and transition to parenthood. Unit III deals with Families under Stress: Propensity to Illness. Each section includes student goals and objectives, and reading lists and assignments. The final sections provide evaluation procedures for student achievement and instructor performance, and information on course revision and student completion methods. (HB)

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THE FAMILY: Nursing Perspectives

In Birth And Parenting

N-201

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California State University
Long Beach

March 1983

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COURSE DESCRIPTION

N-201: The Family: Nursing Perspectives In Birth & Parenting. Lecture, three hours; emphasis upon family structure: psychosocial, biological concepts and nursing intervention supportive to these concepts; will include health & illness behavior, curative & preventive nursing intervention, in-depth Societal & Family interaction.

Curricular Placement:

The Course has been designed as a Module to be included within the University School of Nursing Curriculum, Upper Division education, Bachelor's Degree Curriculum. Students are primarily RN's with a Major in the Dept. of Maternal-Child-Health, i.e., Obstetrics Nurse Specialist, Practitioner in Pediatrics or Obstetrics, however, the Course is equally applicable to students with allied Family Health interests, such as Public Health or Administration.

Class Assignment:

The Course will be offered as a Quarter assignment, 10 week, meeting once a week, 3 hrs. The classes will be structured for lecture presentation, use of relevant Media (films, slides) and guest lecturers an option of the Instructor. Class size will be small to promote an active learning environment through discussion, role-playing, student reports.

Student Population:

Students will be RN's with professional knowledge and skills in Obstetrics or Pediatrics. Course content will be structured to provide awareness of psychosocial interrelationships in Family

health and to encourage cognitive comprehension, analysis, synthesis and application of problem solving techniques. Nursing is an active, care-giving Profession with an holistic perspective to the client. Problem solving is basic to the education of the Nurse-Provider. Students will be in the Upper Division level, seeking a Bachelor's Degree with which to assume higher level nursing employment, such as Supervisor or Dept. Chairman, or independent nursing functions, such as Practitioner or Instructor. Though this University does not offer Graduate Education, nurses with a BSN from this University are will received in those Universities which do offer Graduate nursing programs. Student attrition does occur with work-related conflicts, however, nursing Professionals seeking their BSN are usually very dedicated and attrition could be anticipated at about 10%.

COURSE CONTENTS

The complex interrelationships between health and the Family have only become the focus of expanded research and Study in the last two decades. The Family Setting is a major factor in child-rearing, in development of adult personality and as a determinant of health behavior and illness predisposition. The Nurse-Clinician interacts with the Family in both preventive and curative health situations. Patient education functions in both preventive and curative health care. Education of the Nurse-Practitioner reflects the Educational philosophy expressed in "Areas-of-Living", i.e., knowledge achieved for person adaptation to Life Events and living with adaptive behavior. The

goals of this School of Nursing reflect this same philosophy. For example, and as synthesized, these goals might be stated to include these components: a) To provide a learning environment in nursing education which will promote a greater understanding and knowledge with which the student may more knowledgeably apply her nursing skills; b) To promote the nursing student with an educational setting in which greater knowledge may be gained in current advances, practices in the Humanities as well as the Scientific Disciplines; c) To provide the nursing student with an educational setting which will promote her personal growth as a Nurse Professional as well as increasing her skills proficiency.

Long-Range Course Goals:

The Aims reflected in Course presentation support the Goals of the School of Nursing. Long term Course Goals will be:

1. To provide the Community with Nursing Professionals who are both knowledgeable and skilled in supporting Family Health issues.
2. To provide the Community with Nursing Professionals advanced in knowledge of Family interrelationships which will be reflected in her greater understanding of Nurse-Family health interactions.
3. To provide the Community with Nurse-Practitioners who's skills promote beneficial problem solving in Family health situations.
4. To provide greater depth in knowledge of the Family, Family interactions, structure of the Family Unit, health behavior in the Family and Society.
5. To provide the Nurse-Practitioner with personal and professional knowledge in problem solving skills with which to more effectively apply her Professional expertise.

6. To provide the student with the educational qualifications with which to increase her eligibility for occupational advancement.

Long-range Course Objectives:

One year after completion of the Course, the Instructor will mail a Survey to the Students to validate these long-range objectives:

1. 50% of the students will be working on a higher occupational level with increased professional responsibilities.
2. 85% of the students will be actively working in Family health related areas.
3. 85% of those students working in Family health areas will be judged, by their Supervisors, to be above average in their nursing performance.
4. 85% of the students will respond to the Survey stating they feel more capable in their nursing performance and find class knowledge has increased the effectiveness of their nursing performance.

End-of-Course Objectives:

Upon completion of the Course:

1. 90% of the students will complete the Course with a satisfactory grade, C or better i.e., as evidenced by the Final Grade.
2. Less than 10% of the students will drop out of the Course as evidenced by Instructor notification.
3. 90% of the students will have demonstrated a depth of knowledge in nursing interventions for the Family Unit as evidenced by test performances throughout the classes.
4. 30% of the students will have newly subscribed to one relevant Nursing Journal as recommended in class, ex. Nursing Research, MCN, Advances in Nursing Science.
5. 75% of the students will respond on the Instructor Evaluation Survey that this class was of personal value to them and met their educational needs.

Classes of Instruction:

UNIT I: THE FAMILY: IN SOCIETY

- Class 1: Socio-Cultural and Health Perspectives.
3 hrs: lecture, discussions.
- Class 2: Family: Structure and Identities
3 hrs: lecture, discussion, film.
- Class 3: Psycho-social Perspectives: Normative and
Pathological Adaptations.
3 hrs: lecture, discussion.

UNIT II: THE FAMILY: MEMBER AUTONOMY

- Class 4: Growth To Personal Health
3 hrs: lecture, discussion, roll-playing.
Unit I test.
- Class 5: The Pregnant Family
3 hrs: lecture, discussion, film.
- Class 6: And Baby Makes Three
7 6 hrs. (2 classes): lecture, discussion, film.
- Class 8: Transition Into Parenthood: the First Two Years.
3 hrs: lecture, discussion, film.
Unit II test

UNIT III: FAMILIES UNDER STRESS: PROPENSITIES TO ILLNESS

- Class 9: Health Complications and Illness Related Issues.
10 6 hrs. (2 classes): lecture, discussion.

MATERIALS OF INSTRUCTION

Texts and Manuals:

Course references and chapter assignments will be made in
two texts:

Fine, Marvin J. Handbook on Parent Education.
New York, Academic Press, 1980.

Kagan, Jerome. The Growth of The Child. (paper-back)
New York, W.W. Norton and Co., Inc., 1978.

These texts are available in the University Book Store.

In addition, course content will involve an extensive use of
published research reports and literature reviews. These mater-
ials may be found in the University Library. The class will
also be advised that the Instructor will allow responsible

borrowing of her materials. A Reading List will be provided for each class and the student will be responsible for reading text references and starred (*) publication articles. These readings will constitute minimum requirements for course participation. However, it is the aspiration of the Instructor that students will respond in interest and expand their readings to include those references included in the Reference List. Class content and discussions will be of much greater value to the students' learning experience and discussions less ominous to those students who pursue the literature reviews! All students will be expected to respond to discussion Objectives.

Bibliography of Library Materials:

A Reading List with text assignments will be included, in context, with the presentation of each class. In addition, an extended Reference List will follow the Course presentation. This will be the format as given the students.

Audio-Visual Materials:

The following films will be considered for instruction implementation and may be requested from the School of Nursing Media Center:

The Amazing Newborn
 Planning for Parenthood
 The Post-Partum Experience
 Parenting in Early Childhood
 A Sociologist View: The Young Family

UNITS OF INSTRUCTION

UNIT I: THE FAMILY: IN SOCIETY

Class 1: Socio-Cultural and Health Perspectives

Social structures institutionalize systems of values. Health and illness may be considered as universal categories applying to all human beings in all Societies and may be considered as socially and culturally relative. The Nuclear Family is the major subsystem of Society and is always articulated in complex ways with external structures of a higher level of organization.

Goal: The clustering of social or Life Events achieves etiological significance in illness seen both in predisposition and onset of illness. The student should understand the significance of sociocultural and health perspectives as they relate to Family interrelationships.

Objective: The student will be able to relate the state of illness to biosociological factors in the Family and Society in a written assignment, take-home, 2-4 pgs. See assignment.

Objective: You will be able to cite 2 examples of Life Events leading to Life Changes and explain how these events or changes impact upon Family relationships. In class discussion.

Goal: You will understand the elements of Family organization and how they influence health behavior.

Objective: In class, you will be able to give one example of a health-related social support and explain its value to the Family.

Objective: Given the definitions describing elements in family organization and health behavior, you will be able to match the descriptions to the definitions in a closed-book, test, Class 4. 75%

Goal: The student will understand the Health Belief Model (HBM) in its application to assessing health behavior.

Objective: You will, in class, be able to actively discuss 3 criteria of the HBM.

Objective: Given 3 expressions of the HBM, you will be able to select the best choice of expression in a closed-book, test, Class 4. 80%

Assignment: Controversy reigns in the definition of the Illness state. Is Illness a form of deviance? Or is it a form of adaptation? Or are these two premises even mutually exclusive? You will discuss these issues in an essay, 2-4 pgs., take-home, typewritten. Include: sociological

and biological components, i.e.: role, task, family and Societal organization, mental and physiological predispositions to illness and general etiology of concrete illness states. Less than 3 errors in punctuation or spelling expected in written papers. Due next week.

Reading List:

Kagan, Marvin J. Handbook of Parent Education. New York, Academic Press, 1980. Introduction

*Parsons, Talcott, "Definitions of Health & Illness in the Light of American Values and Social Structure". In: Jaco, Gartly. Patients, Physicians, & Illness. 3rd Ed. New York, The Free Press, 1972.

Bice, Thomas W., et.al., "Socioeconomic Status and Use of Physician Services", Medical Care. X(May-June, 1972)3:261-271.

Green, Lawrence W., "Manual for Scoring Socioeconomic Status for Research on Health Behavior". Pub.Hlth.Rep. 85(Sept., 1970)9:815-827.

*Mickhail, Blance, "The Health Belief Model: A Review and Critical Evaluation of the Model, Research & Practice". Adv.Nsq.Sci. Oct., 1981:65-80.

Class 2: Family: Structure and Identities.

The Family is the major subsystem of Society. Socialization of the child is the major function of the Family. Role identities develop within the Family Unit to meet role expectations; personalities evolve and are given shape. Health attitudes are learned within the Family; good health habits promote good health. It is important that the student be able to relate health behaviors to family interrelationships and socialization to role functions of family members.

Goal: You will be aware of the specialization in the Nuclear Family.

Objective: In class, you will be able to compare 3 kinship structures in the Nuclear and extended Family.

Objective: In class, you will be able to discuss the Community as a surrogate, kinship structure.

Goal: You will be able to analyze Role Theories as given by Parsons and Sarbin.

Objective: In class, you will define three criteria for each Role Theory.

Objective: In class, you will discuss one concept in which the two Theorists agree or disagree.

Goal: The Mother exerts the greatest influence upon health behavior in the Family. The health professional must be aware of this position and her influence upon health activities within the Family.

Objective: You will be able to identify the 3 criteria, as given in the HBM, which influence the mother's initiation of family health behavior. Test, closed-book, Class 4.

Goal: You will be able to understand basic learning concepts and relate these concepts to family interactions.

Objective: In class, you will be able to relate one concept in learning as you feel it applied to your family parenting.

Objective: Given descriptions of learning elements, you will be able to match these elements to the names of the Theorists with whom the elements are associated. Closed-book, test, Class 4. 80%

Reading List:

Kagan (Growth of the Child) Chp. 1,9.

Fine, Jerome (Handbook On Parent Ed.) Chp. 2,3.

*Parsons, Talcott, "The Transmission of Values". In: Coser, Rose L. ed. The Family: Its Structures and Functions. New York, St.Martin's Press. 1964.

*Sarbin, Theodor R. "Role Theory". In: Lindzey, Gardner, ed. Handbook of Social Psychology. Vol. II Mass., Addison-Wesley Pub. Co., 1954.

Nye, F. Ivan, Role Structure and Analysis of the Family. Beyerly Hills, Sage Pub., Inc., 1976.

Litman, Theodore J., "The Family In Health & Health Care". In: Jaco, E. Garly, Patients, Physicians and Illness. 3rd Ed. New York, The Free Press, 1979.

Class 3: Psychosocial Perspectives: Normative and Pathological Adaptations.

Health Professionals are concerned with Man in his totality, not just the elements or parts. Systems Theory places man as the biological-social-physio-

logical being in constant interaction, interdependent i.e., with his environment. Elements in the Systems, Man-Family-Environment, interact in dynamic dimensions of health and illness. The Health Professional is in the position to mediate between health and illness, to encourage preventive health behavior, to moderate crisis behavior and to support curative care and behavior to illness.

Goal: You will be able to understand the symbolic Interactionist Theory and relate this conceptualization to the Family in Society.

Objective: You will be able to identify primary, secondary, tertiary relationships. In closed-book, test, Class 4. 100%

Objective: In class, you will be able to relate one major effect of illness upon each of the Role taxonomies in Objective 1.

Objective: In class, you will be able to discuss one nursing intervention in role maladjustments caused by illness.

Goal: You will understand the fundamentals of motivation and health-related adjustments to motivation.

Objective: In class, you will explain one concept of anxiety to family and role values.

Objective: You will be able to write an essay integrating motivations and stress as they relate to Family health behavior. See Assignment.

Goal: You will be able to understand Psychosocial factors as predictors of medical behavior as described in selected literature reviews.

Objective: You will, in class, analyze age and income in relation to utilization of health services.

Objective: In class, you will define education in its relation to health behavior and nursing interactions.

Assignment: The focus of this essay will be brief conceptualizations ("depth" of discussion commensurate with your explanation, i.e.) of motivation, drive, reinforcement, fear and anxiety, stress as these processes affect individual choice of health behavior. In a 2-3 pg. paper, choose two health behaviors in family role functioning, explain these behaviors by the above criteria, and include 2 examples in which nursing actions in your area of specialty could be assistive to the patient's well-being. Take-home (Min. errors spelling, punctuation). Due 2 weeks.

Reading List:

Kagan (Growth of Child) Chp. 7.

*Hazzard, Mary E. "An Overview of Systems Theory".
Nsq.Cl.No.Am. 6 (Sept., 1971)3:385-393.

*Becker, Marshall H., et.al., "Selected Psychosocial Models and Correlates of Individual Health-Related Behaviors". Medical Care.XV(May 1977)5Supp:27-46.

*Pearlin, Leonard I. and Morton A. Lieberman, "The Stress Process". Jr.Hlth.Soc.Behav. 22(Dec., 1981) 337-356.

Jeffcoate, J.A. "Role Perception and Response to Stress in Fathers and Mothers Following Pre-Term Delivery". Soc.Sci.Med. 13A(1979):139-145.

Litman, Theodore J., "Health Care and The Family: A Three-Generational Analysis". Med.Care. IX(Jan-Feb., 1971)I:67-81.

UNIT II: THE FAMILY: MEMBER AUTONOMY

Man's sense of self-identity reflects his goals, values, strengths and weakness, beliefs and attitudes. Theorists propose man in his "locus-of-control"; researchers see man as the dependent variable, the Person-In-Control. The Person-In-Control chooses actions (or absence of action) and, in turn, projects his sense of self in those choices he selects. Don Hamachek poses three questions in answer to growth in personal maturity, "How Am I? Where Am I Going? Why?" (1971, pg.1). The Health Professional applies skills supportive to each of these inquiries.

Class 4: Growth to Personal Health

Thomas Gordon (P-E-T in Action) advocates communication as "...the value of a democratic and nonpower climate in the home, the rewards of building relationships with their children that will bring feelings of mutual respect and love-so all members of a family can become what they are capable of being." (1976, pg.7). This philosophy is not exclusive to the family but extends to all relationships: husband-wife, boss-subordinate, teacher-student, counselor-client, friend-friend, nurse-patients.

Goal: The student will understand communication skills as applicable to her use in providing nursing services

to Parents.

Objective: In class, you will define one P.E.T. concept and demonstrate this concept, in role-playing assignment.

Objective: You will show support to values of communication in interpersonal interactions as demonstrated in class roll-playing activities.

Goal: You will understand general approaches to human relationships, such as Maslow, Rogers, Berne for ex.

Objective: Given Maslow's hierarchy of needs, you will be able to rank order these needs according to the correct hierarchy in closed-book test, Class 4. 100%

Objective: In class, you will apply the medical diagnosis "Failure-to-Thrive" to the philosophy of Eric Berne.

Assignment: Students will have been assigned to small groups (3-4). Each group will prepare and demonstrate a role-playing family situation using one of the communication techniques: Active listening (nurse-patient), T-A (nurse-Parent), P-E-T (Parent-Child), Cutting Loose (Parent-Parent). Presentation 5-15 min.

Unit I TEST: 30 min. (See Appendix for Test Examples.)

Reading List:

Kagan (Growth of Child) Chp. 8,5.

Fine, Marvin (Handbook Parent Ed.) Chp. 5,6.

*Gordon, Thomas. P.E.T. In Action. U.S., Wyden Books, 1976.

Halpern, Howard M. Cutting Loose. New York, Simon Schuster, 1976.

*Hamachek, Don E. Encounters With The Self. New York, Holt, Rinehart and Winston, Inc., 1971

*Maslow, Abraham. Toward a Psychology of Being. 2nd Ed. New York, Van Nostrand Reinhold Co., 1981.

Class 5: The Pregnant Family.

Expectant Parents are in a Crisis of personal and interpersonal relationships. The structure of the Nuclear Family must adjust to new Systems interactions. Member roles assume new dimensions.

Goal: You will understand filial and attachment behaviors.

Objective: In class, you will explain the "critical period" as it relates to "attachment".

Objective: In class, you will explain 2 problems inherent in early mother-infant separation.

Objective: In class, you will discuss 2 examples of father affiliative behavior during pregnancy.

Goal: You will be aware of father and mother self-needs and actively discuss these needs in class.

Objective: In class, you will relate 2 social interactions to the needs of perspective parents.

Objective: In class, you will be able to explain the male-masculinity and father-son role influence.

Goal: You will be able to act in a supportive manner to pregnant Parents.

Objective: In class, you will explain sexual adjustments during pregnancy with one example of an adjustment to sexual needs by mother and father.

Objective: In class, you will be able to explain one manner in which nursing interaction could respond to a parents reluctance to childbirth education classes.

Objective: Given Rubin's 5 maternal role adaptations, you will be able to correctly order these roles in the order in which the mother exhibits these behaviors. Closed*book Test, Class 8. 90%

Reading List:

Kagan (The Growing Child) Chp.6

*Rubin, Reva, "Attainment of the Maternal Role: Part I". Nsq.Res. 16(Summer, 1967)3:237-243.

*ibid Part II. Nsq.Res. 16(Fall)4:342-236.

Dodson, Fitzhugh. How to Father. Los Angeles, Nash Publication, 1974.

Lynn, David B. The Father: His Role In Child Development. Calif., Brooks/Cole Pub. Co., 1974.

Zemlick, Maurice J., "Maternal Attitudes of Acceptance and Rejection During and After Pregnancy." Am.J.Orthopsych. 23(1953):570-583.

Barnett, Clifford R. "Neonatal Separation: The Maternal Side of Interactional Deprivation". Pediatrics. 45(Feb., 1970)2:197-205.

*Brazelton, T. Berry, "The Early Mother-Infant Adjustment". Pediatrics Nov., 1963:931-937.

*Klaus, Marshall H., et.al., "Human Maternal Behavior at the First Contact With Her Young". Pediatrics 46(Aug., 1970)1"187-193.

Ellis, Donelda J., "Sexual Needs and Concerns of Expectant Parents", JOGN Nurs. Sept/Oct, 1980:306-308.

Class 6 and 7: And Baby Makes Three.

The foundations of personality structure in all human societies lies within the internalization of objects and values within the family subsystem-starting with mother-child relations. (Parsons, 1960). Stimulus variety during childhood plays a major role in successful cognitive development. Human warmth and affection are essential to a secure emotional state. Emotional states are major predictors of health and illness states.

Goal: You will have a general knowledge of the philosophies of Erikson and Piaget as they relate to the child's development.

Objective: In class, you will discuss one stage of cognitive development with relevance to parenting behavioral response.

Objective: In class, you will explain one aspect of Erikson's ego concept to a child's socialization.

Objective: In class, you will analyze one concept of cultural (social) deprivation to behavioral retardation.

Goal: You will be familiar with parental-newborn affiliative behavior.

Objective: Given the definition of affiliative behavior, you will match these terms to the appropriate family member. Closed-book test, Class 8. 100%

Objective: In class, you will explain two criteria essential to engrossment, the manner in which nursing action may be supportive and how you would accomplish this interaction.

Goal: You will be able to apply nursing interactions using knowledge of family members growth and development.

Objective: In class, you will state 2 modifications in hospital services which would support psychosocial needs of parents in Obstetrics and Pediatrics.

Objective: In class, relate one example from your experience in which hospital-parent interaction was either

supportive or unsupportive to parent emotional or physical needs. You may choose the setting.

Reading List:

Kagan, (Growth of Child) Chp. 3, 10, 12.

Fine, Marvin (Handbook Parent Ed.) Chp. 4.

*Klaus, Marshall. Maternal-Infant Bonding. St. Louis, C.V. Mosby Co., 1976.

Klaus, Marshall, et.al., "Maternal Attachment"
N.Eng.Jr.Med. 286 (Mar., 2, 1972) 9:460-463.

*Gordon, Ira J. The Infant Experience. Ohio, Charles E. Merrill Pub. Co., 1975.

*Birth and The Family Journal 5 (Winter, 1978) 4
 Special Issue Parent to Infant Attachment.

*Brazelton, T. Berry, Infants and Mothers. New York, Dell Publishing Co., Inc., 1969.

Abramson, J.H. "Antenatal Stress and the Baby's Development". Arch.Dis.Child. 36 (Feb., 1961): 42-49.

Greenberg, Martin and Norman Morris, "Engrossment: The Newborn's Impact upon The Father". Am.J.Orthopsychiat. 44 (July, 1974) 4:520-531.

Class 8: Transition Into Parenthood.

Prevention of social maladjustments in behavior is best accomplished by changing the early childhood experiences rather than altering the Life Experience after maladjustment occurs. The childhood experiences in the home constitute the most important set of influences on adolescent and adult physiological profiles. (Kagan, 1980). Studies have shown that health behavior is learned within the family, that a child's health attitudes are evident by 6 yrs. of age, and there is evidence that childhood attitudes influence adult health practices: values, beliefs, attitudes.

Goal: You will understand major concepts in the Fourth Trimester.

Objective: In class, you will define what is meant by the Fourth Trimester.

Objective: In class, you will describe 2 cognitive abilities of the infant, in first 3 mo., and relate these to the parents expectations of those abilities.

Goal: You will be able to actively support triadic interactions in the first 2 years following birth.

Objective: You will successfully complete a take-home written assignment with given criteria. See assignment.

Objective: Give an example from your own clinical experience in which your intervention was supportive to parent-child interaction, such as, in the Clinic or with a hospitalized sick child, for example.

Goal: You will recognize the implications of the nursing mother upon the family relationships.

Objective: In class, state your opinion of the father's attitudes towards breastfeeding based upon an experience in your clinical practice.

Objective: In class, state 3 components of breast milk and their effect upon infant health.

Objective: In class, you will state three concepts with which you would respond to a mother's inquiry, "I haven't made up my mind if I'm going to breastfeed". Elaborate upon your response.

Assignment: Please respond, in 50-150 wds., to each of the following member roles: Mother-Father-Infant-husband-wife. (An outline with significant, important issues is acceptable). Include what you feel would be three important areas in which nursing interaction could be of greatest support in the Family's first 3 mo. and what type of support you would propose. For ex: Mother: Exhaustion-physical and emotional problem; give her permission to "take" extra naps, do min. household chores, etc. You will elaborate more fully than this example. Take-home, typewritten with criteria for spelling; due next week.

Reading List:

Kagan (Growth of Child) Chp. 2.

Fine (Parent Ed.) Chp. 7, 10, 13.

*Lerner, Harriet E., "Effects of the Nursing Mother-Infant Dyad on the Family". Amer.J.Orthopsychiat. 49(Apr., 1979)1:339-348.

*Wandersman, Lois P., "The Adjustment of Fathers To Their First Baby: The Roles of Parenting Groups and Marital Relationship". BFJ 7(Fall1980)3:155-161.

*Stranik, Mary K. and Betty L. Hogberb, "Transition Into Parenthood". AJN Jan., 1979:90-93.

*Lamb, Michael E., "Father-Infant and Mother-Infant

Interaction in the First Year of Life". Child Develop. 48(1977):167-181.

Waletzky, Lucy R., "Husbands Problems with Breast-Feeding". Am.J.Orthopsychiat. 49(Apr., 1979)2:349-352.

Unit II Test. (See Appendix for examples)

UNIT III: FAMILIES UNDER STRESS: PROPENSITIES TO ILLNESS

Class 9 and 10: Health Complications and Illness related Issues.

Research continues to support an important, positive correlation between high Life changes, stress and illness potential. The Mother's attitudes, beliefs and expectations have a strong effect upon her relationship to the infant. Infant interactions influence parental response to the child. Psychological-social=physical factors are important in the premature birth, the teenage mother, the single mother and complications of pregnancy and birth.

Goal: You will have an increased depth of knowledge in psychosocial stress factors as causative to illness signs.

Objective: In class, you will state 3 criteria essential to the parents satisfactory adjustment to the Primary Cesarean Birth and how you could promote this adjustment.

Objective: You will give a 5 min. report, synthesizing the content of one article, either from class selection or of your own choice. See assignment.

Goal: You will understand psychosocial and biological phenomenon relative to complications of pregnancy and birth.

Objective: In class, you will offer your opinion as to the value of Childbirth Preparation classes (give type) as you have observed in laboring parents. Include physical progress, emotional behaviors,

Objective: In class, you will explain how you would explain amniocentesis to the 35 yr. Primiparous mother.

Goal: You will be familiar with social support systems available to the stressed family.

Objective: In class, you will describe one supportive social intervention for the family with the congenitally malformed child.

Objective: In class, you will describe two supportive interventions for the single mother.

Objective: In class, you will discuss nursing assessment of parent behavior which could indicate maladjustment to a stressful situation. Give one example and suggest supportive nursing intervention to this situation.

Assignment: Students will be asked to prepare a 5-10 min. report based upon a current research or literature article. Selection may be made from articles available in class or by your own choosing. 1½ hrs. of each Class 9 and 10 will be given to verbal reports and discussion of this material. Include: purpose of author, concepts in subject matter, how you interpret this material and its relevancy to Family health.

Reading List:

- Kagan (Growth of Child) Chp. 11.
- Fine (Parent Ed.) Chp. 8.9.

Furstenberg Jr., Frank F. The Social Consequences of Unplanned Parenthood of Teenage Childbearing. New York, The Free Press, 1976.

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EVALUATION

Evaluation of the Course will be two-fold: student achievement and Instructor performance.

Student Achievement:

Mastery of achievement in class objectives is the premise upon which the Course instruction is based. Formative and Summative evaluations will validate this goal. Student performance in each area of class discussion, oral reports, role-playing will be noted on a Student Performance Record. For example, components noted will be: spontaneity of performance, relevance and originality of information given, contribution (or irrelevance) value of information to discussion of subject, completeness of ideas expressed, interest (activity or apathy) to discussion. Minimum performance (Cgrade i.e.) will be pre-assigned to the Record criteria. Students not meeting the minimum performance by the 6th class will be requested to see the Instructor for assessment and assistance. Discussion performance will constitute 15% of the Final Grade.

Both written assignments and tests will be scored as separate tasks. Summatively, test grades will constitute 50% of the final grade and written assignments 35%. Student "make-ups" will be allowed, with advanced notice to the Instructor, i.e. if illness or personal conflicts preclude accomplishing the tasks at the prescribed times.

Instructor Performance:

20 min. will be allowed at the conclusion of the last class

for student response to the San Jose State College Instructor Rating Scale. Responses will be anonymous.

A Dept. Faculty Colleague will be asked to observe at least one class and be encouraged to critique the class on the basis of Instructor performance, student interest and relativity of subject content. This Colleague will have been given the Course Syllabus and be familiar with the goals and objectives, format and class structure.

Course Revision:

Course Subject Content: The Instructor will continue her activity in both educational and clinical seminars, lectures and personal reading to promote her awareness of current nursing concepts and technological advances. She will also respond to student interest, or apathy, generated in class activities and will re-examine her subject matter with a view toward revisions in class content or presentation as necessary to meet criteria of relevancy in current concepts and to the student needs in practical application of class knowledge. The Instructor will appraise student performance in discussions and Unit Tests to assess objective achievements. She will utilize Item Analysis for test results which would indicate problems in test items. She will make revisions in test items and discussion techniques pursuant to her findings.

Instructor Performance: The Instructor will personally respond to the student Evaluation Scale when items notable in consensus would indicate a problem in the class learning environ-

ment. The Instructor will also request her Dept. Colleague to review the Scale and any Course grading components which would indicate a need for an objective appraisal and consideration of Course revisions.

Student Completion:

The End-Of-Course Objectives noted earlier reflect the goals of this Course. Student attrition is inevitable but, also, regrettable to the Instructor. The Instructor will be aware of student progress through class participation and will be alert to problems as evidenced in that participation. As noted earlier, by the 6th Class, students with questionable performance will be contacted by the Instructor with the purpose of individual assistance. The Instructor will be amenable to alternate assignments and test make-ups. Remedial solutions will have to be individualized to the student and efforts will be made to provide Course completion solutions. Students may appeal Final Grades and, this too, will be an individual assessment and problem solution.

APPENDIX

TEST CONSTRUCTION

Unit tests will be given at the conclusion of Class 4 and 8. 30 min. will be allotted for testing. Test conditions will be noted as closed-book, no notes. Both Tests and essays will be graded by the Instructor and returned to the students the following week with Instructor comments in recognition of student motivation, criteria learning and objective achievement.

Test construction will adhere to essential characteristics of a good measuring instrument. (Popham, 1978, Chp. 6). Components to be included: a) Items congruent to one type of behavior measurement; b) Items succinctly relevant to proposed measurement; c) clear, concise item specifications: brief depiction behavior asked, sample items for clarification, statements to delimit extraneous stimuli, explicate standards for student response, avoidance of item ambiguity; d) Items will be ordered from least to most difficult and homogenous for subject content in each Class represented.

Items as represented in this Sampling: may contain minimum specifications; items to validate stated class objectives may not be represented in the Sample.

SAMPLE ITEMS: CLASS 4

If you agree with the following statements, mark True (T) in the space provided; if you disagree, mark False (F). The Items are not intended to be ambiguous; they are either totally True, or if you have doubts, respond False. (No answer will be judged incorrect, no points given.)

2 points each

_____ Clustered social "stress event" are to mental illness as a specific role maladjustment is to onset of maladaptive behavior.

_____ Stress is to the vulnerability of the Family
as value of interactions is to sentiment in
the Family.

Mark "X" in the space provided before the response which
you feel best describes the given statement:
(There is but one correct response)

The Health Belief Model best expresses:

- _____ Parsonian deviance in health behavior.
_____ Family and Social expectations to illness.
_____ The patient expressing cognitive awareness
to illness.

6 points

Socialization relates directly to:

- _____ Personality
_____ The biological organism
_____ Mental health
_____ Somatic illness

3 points

The pervasive role of the Mother to initiate family health
behavior is determined by 3 criteria. In 1-25 wds, explain
each of these criteria:
(Answers to all 3 **expected**; no score with incomplete response)

Knowledge of **salience** in illness _____

Knowledge of action to be taken _____

Interest, concern, choice for action _____

6 points

SAMPLE ITEMS: CLASS 8

Identify, in 1-2 wds. each, the 4 basic P_E_T listening skills:

1. _____ 3. _____

2. _____ 4. _____

27

2 points each

You will order from "1" (being the first, or lowest need) to "5" (being the highest, most advanced need) Maslow's "needs" according to his stated hierarchy:

_____ Security	_____ Socialization, ego
_____ Self-respect, esteem	_____ Self-actualizing
_____ Life	

2 points each correct answer.

You will respond True (T) in the space provided if you feel **the** whole statement is True or False (F) if you disagree or doubt any part of the statement. (Questions left unanswered will be judged no score)

_____ Nonattachment, to the baby, does not mean alienation to the infant.

_____ Pregnant mothers view, or identify i.e., to their husbands chiefly in his paternal roles.

_____ "Fore-Milk" is of higher fat content than "hind-milk"

Match responses (in right column) to stimulus (in left column) by placing the letter identifying the action (on right) before appropriate identity noted on left:

2 points each

_____ Father	a. <u>attachment</u>
_____ Baby	b. <u>Bonding</u>
_____ Mother	c. <u>Engrossment</u>

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